





Clean Water Indiana 2021 Non-SWCD Led **Competitive Grant Application**

- *Character counts for the questions below include spaces.
 * If funded, lead entities will need to set up a vendor and bidder profile with the State of Indiana.

Contact	Info	orm	ation
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Lead Entity

Address	
City, State, ZIP	
Lead Entity Contact Name & Title	
Email Address	
Phone	
Project Amount Request	
Signatory Authority	
Signatory Authority Email	
ocal SWCD Contact	
Cooperating SWCD	
Point of Contact	
SWCD Phone	
Project Information	
Project Name	
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Please describe why this project is needed. (Maximum 2000 characters)
What are the goals of the project and how will you track progress toward these
goals? (Maximum 2000 characters)
goals: (Maximum 2000 Characters)

Describe each partner and their specific contributions and anticipated match to the project.

Budget InformationPlease fill out the following table with your project budget:

Entity/Line Item	CWI Funds Requested	Cash Match	In Kind Match
	•		

Describe how CWI funds will be utilized. (Maximum 2000 characters) Please use this space to provide additional details about your project budget.
If requesting disbursement of up to 50% of funds at the beginning of the grant, please provide a justification. (Maximum 2000 characters)